

Fill in this information to identify the case:

United States Bankruptcy Court for the:

District of _____
(State)

Case number (if known): _____ Chapter 11

☐ Check if this is an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

04/16

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name

Sycamore Investments LLC

2. All other names debtor used in the last 8 years

Include any assumed names, trade names, and *doing business as* names

3. Debtor's federal Employer Identification Number (EIN)

35-2517432

4. Debtor's address

Principal place of business

510 S. Sycamore St
Number Street
Suite H.
Petersburg VA 23803
City State ZIP Code

City of Petersburg
County

Mailing address, if different from principal place of business

Number Street

P.O. Box

City State ZIP Code

Location of principal assets, if different from principal place of business

Number Street

City State ZIP Code

5. Debtor's website (URL)

6. Type of debtor

- ☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))
☐ Partnership (excluding LLP)
☐ Other. Specify: _____

Debtor

Name

Case number (if known)

7. Describe debtor's business

A. Check one:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
☐ Railroad (as defined in 11 U.S.C. § 101(44))
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
☒ None of the above

B. Check all that apply:

- ☐ Tax-exempt entity (as described in 26 U.S.C. § 501)
☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3)
☐ Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

8. Under which chapter of the Bankruptcy Code is the debtor filing?

Check one:

- ☐ Chapter 7
☐ Chapter 9

☒ Chapter 11. Check all that apply:

- ☒ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,566,050 (amount subject to adjustment on 4/01/19 and every 3 years after that).
☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
☐ A plan is being filed with this petition.
☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11 (Official Form 201A) with this form.
☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?

☐ No

☒ Yes.

District Enskan

When 04/05/2016
MM / DD / YYYY

Case number 16-31679

If more than 2 cases, attach a separate list.

District _____

When _____
MM / DD / YYYY

Case number _____

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?

☒ No

☐ Yes.

Debtor _____

Relationship _____

District _____

When _____
MM / DD / YYYY

List all cases. If more than 1, attach a separate list.

Case number, if known _____

Name _____

Check all that apply:

- ☒ No

Why does the property need immediate attention? (Check all that apply.)

- What is the hazard?**

- ☐
- Other

Where is the property?

Number	Street
--------	--------

City

State

ZIP Code

Is the property insured?

- Contact name**

Phone

Check one:

- 1-49

- ☐
- 1,000-5,000

- ☐
- 25,001-50,000

- ☐
- \$0-\$50,000

- ☐
- \$1,000,001-\$10 million

- ☐
- \$500,000,001-\$1 billion

- ☒
- \$500,001-\$1 million

- ☐
- \$100,000,001-\$500 million

- ☐
- More than \$50 billion

Debtor	_____	Case number (if known)	_____
	Name		
16. Estimated liabilities	<input type="checkbox"/> \$0-\$50,000	<input type="checkbox"/> \$1,000,001-\$10 million	<input type="checkbox"/> \$500,000,001-\$1 billion
	<input type="checkbox"/> \$50,001-\$100,000	<input type="checkbox"/> \$10,000,001-\$50 million	<input type="checkbox"/> \$1,000,000,001-\$10 billion
	<input checked="" type="checkbox"/> \$100,001-\$500,000	<input type="checkbox"/> \$50,000,001-\$100 million	<input type="checkbox"/> \$10,000,000,001-\$50 billion
	<input type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> More than \$50 billion

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

17. Declaration and signature of authorized representative of debtor
- The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.
 - I have been authorized to file this petition on behalf of the debtor.
 - I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 06/21/2017
MM / DD / YYYY

by [Signature] Anthony Bailtrap, Manager
Signature of authorized representative of debtor Printed name

Title Manager

18. Signature of attorney

X _____
Signature of attorney for debtor

Date _____
MM / DD / YYYY

Printed name _____

Firm name _____

Number _____ Street _____

City _____ State _____ ZIP Code _____

Contact phone _____ Email address _____

Bar number _____ State _____

Fill in this information to identify your case:

Debtor 1
First Name Middle Name Last Name
Debtor 2
(Spouse, if filing) First Name Middle Name Last Name
United States Bankruptcy Court for the: District of
Case number
(If known)

☐ Check if this is an amended filing

Official Form 104

For Individual Chapter 11 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims Against You and Are Not Insiders

12/15

If you are an individual filing for bankruptcy under Chapter 11, you must fill out this form. If you are filing under Chapter 7, Chapter 12, or Chapter 13, do not fill out this form. Do not include claims by anyone who is an *insider*. Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20 percent or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Also, do not include claims by secured creditors unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information.

Part 1: List the 20 Unsecured Claims in Order from Largest to Smallest. Do Not Include Claims by Insiders.

Unsecured claim

1	<p><u>Elizabeth Boudry + Luan ASSOC</u> Creditor's Name <u>519 Washington St</u> Number Street <u>Park Smith VA 23704</u> City State ZIP Code Contact <u>757-344</u> Contact phone</p>	<p>What is the nature of the claim? \$ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input checked="" type="checkbox"/> None of the above apply Does the creditor have a lien on your property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Total claim (secured and unsecured): \$ <u>220,000</u> Value of security: - \$ <u>600,000</u> Unsecured claim \$</p>
2	<p><u>Dr. Walter Blakely</u> Creditor's Name <u>2350 Suffolk Rd</u> Number Street <u>Charlottesville VA 22904</u> City State ZIP Code Contact Contact phone</p>	<p>What is the nature of the claim? \$ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input checked="" type="checkbox"/> None of the above apply Does the creditor have a lien on your property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Total claim (secured and unsecured): \$ <u>6000</u> Value of security: - \$ <u>202,000</u> Unsecured claim \$</p>

Debtor 1

First Name Middle Name Last Name

Case number (if known)

Unsecured claim

3

Creditor's Name
Number Street
City State ZIP Code
Contact
Contact phone

What is the nature of the claim? \$
As of the date you file, the claim is: Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply
Does the creditor have a lien on your property?
☐ No
☐ Yes. Total claim (secured and unsecured): \$
Value of security: - \$
Unsecured claim \$

4

Creditor's Name
Number Street
City State ZIP Code
Contact
Contact phone

What is the nature of the claim? \$
As of the date you file, the claim is: Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply
Does the creditor have a lien on your property?
☐ No
☐ Yes. Total claim (secured and unsecured): \$
Value of security: - \$
Unsecured claim \$

5

Creditor's Name
Number Street
City State ZIP Code
Contact
Contact phone

What is the nature of the claim? \$
As of the date you file, the claim is: Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply
Does the creditor have a lien on your property?
☐ No
☐ Yes. Total claim (secured and unsecured): \$
Value of security: - \$
Unsecured claim \$

6

Creditor's Name
Number Street
City State ZIP Code
Contact
Contact phone

What is the nature of the claim? \$
As of the date you file, the claim is: Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply
Does the creditor have a lien on your property?
☐ No
☐ Yes. Total claim (secured and unsecured): \$
Value of security: - \$
Unsecured claim \$

7

Creditor's Name
Number Street
City State ZIP Code
Contact
Contact phone

What is the nature of the claim? \$
As of the date you file, the claim is: Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply
Does the creditor have a lien on your property?
☐ No
☐ Yes. Total claim (secured and unsecured): \$
Value of security: - \$
Unsecured claim \$

Debtor 1

Case number (if known) _____

First Name Middle Name Last Name

Unsecured claim

8

Creditor's Name _____
Number _____ Street _____
City _____ State _____ ZIP Code _____
Contact _____
Contact phone _____

What is the nature of the claim? _____ \$ _____
As of the date you file, the claim is: Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply
Does the creditor have a lien on your property?
☐ No
☐ Yes. Total claim (secured and unsecured): \$ _____
Value of security: - \$ _____
Unsecured claim \$ _____

9

Creditor's Name _____
Number _____ Street _____
City _____ State _____ ZIP Code _____
Contact _____
Contact phone _____

What is the nature of the claim? _____ \$ _____
As of the date you file, the claim is: Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply
Does the creditor have a lien on your property?
☐ No
☐ Yes. Total claim (secured and unsecured): \$ _____
Value of security: - \$ _____
Unsecured claim \$ _____

10

Creditor's Name _____
Number _____ Street _____
City _____ State _____ ZIP Code _____
Contact _____
Contact phone _____

What is the nature of the claim? _____ \$ _____
As of the date you file, the claim is: Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply
Does the creditor have a lien on your property?
☐ No
☐ Yes. Total claim (secured and unsecured): \$ _____
Value of security: - \$ _____
Unsecured claim \$ _____

11

Creditor's Name _____
Number _____ Street _____
City _____ State _____ ZIP Code _____
Contact _____
Contact phone _____

What is the nature of the claim? _____ \$ _____
As of the date you file, the claim is: Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply
Does the creditor have a lien on your property?
☐ No
☐ Yes. Total claim (secured and unsecured): \$ _____
Value of security: - \$ _____
Unsecured claim \$ _____

12

Creditor's Name _____
Number _____ Street _____
City _____ State _____ ZIP Code _____
Contact _____
Contact phone _____

What is the nature of the claim? _____ \$ _____
As of the date you file, the claim is: Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply
Does the creditor have a lien on your property?
☐ No
☐ Yes. Total claim (secured and unsecured): \$ _____
Value of security: - \$ _____
Unsecured claim \$ _____

Debtor 1

First Name Middle Name Last Name

Case number (if known)

Unsecured claim

13

Creditor's Name
Number Street
City State ZIP Code
Contact
Contact phone

What is the nature of the claim? \$
As of the date you file, the claim is: Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply
Does the creditor have a lien on your property?
☐ No
☐ Yes. Total claim (secured and unsecured): \$
Value of security: - \$
Unsecured claim \$

14

Creditor's Name
Number Street
City State ZIP Code
Contact
Contact phone

What is the nature of the claim? \$
As of the date you file, the claim is: Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply
Does the creditor have a lien on your property?
☐ No
☐ Yes. Total claim (secured and unsecured): \$
Value of security: - \$
Unsecured claim \$

15

Creditor's Name
Number Street
City State ZIP Code
Contact
Contact phone

What is the nature of the claim? \$
As of the date you file, the claim is: Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply
Does the creditor have a lien on your property?
☐ No
☐ Yes. Total claim (secured and unsecured): \$
Value of security: - \$
Unsecured claim \$

16

Creditor's Name
Number Street
City State ZIP Code
Contact
Contact phone

What is the nature of the claim? \$
As of the date you file, the claim is: Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply
Does the creditor have a lien on your property?
☐ No
☐ Yes. Total claim (secured and unsecured): \$
Value of security: - \$
Unsecured claim \$

17

Creditor's Name
Number Street
City State ZIP Code
Contact
Contact phone

What is the nature of the claim? \$
As of the date you file, the claim is: Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply
Does the creditor have a lien on your property?
☐ No
☐ Yes. Total claim (secured and unsecured): \$
Value of security: - \$
Unsecured claim \$

Debtor 1

First Name Middle Name Last Name

Case number (if known)

Unsecured claim

18

Creditor's Name
Number Street
City State ZIP Code
Contact
Contact phone

What is the nature of the claim?

\$

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply

Does the creditor have a lien on your property?

- ☐ No
☐ Yes. Total claim (secured and unsecured): \$
Value of security: \$
Unsecured claim \$

19

Creditor's Name
Number Street
City State ZIP Code
Contact
Contact phone

What is the nature of the claim?

\$

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply

Does the creditor have a lien on your property?

- ☐ No
☐ Yes. Total claim (secured and unsecured): \$
Value of security: \$
Unsecured claim \$

20

Creditor's Name
Number Street
City State ZIP Code
Contact
Contact phone

What is the nature of the claim?

\$

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply

Does the creditor have a lien on your property?

- ☐ No
☐ Yes. Total claim (secured and unsecured): \$
Value of security: \$
Unsecured claim \$

Part 2: Sign Below

Under penalty of perjury, I declare that the information provided in this form is true and correct.

Signature of Debtor 1
Signature of Debtor 2

Date 6/21/2017
MM / DD / YYYY

Date
MM / DD / YYYY

UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF VIRGINIA
_____Richmond_____Division

In re SYCAMORE INVESTMENTS LLC

Case No.

Chapter 11

Debtor(s)

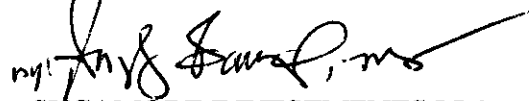
COVER SHEET FOR LIST OF CREDITORS

I hereby certify under penalty of perjury that the master mailing list of creditors submitted either on computer diskette or by a typed hard copy in scannable format, with Request for Waiver attached, is a true, correct and complete listing to the best of my knowledge.

I further acknowledge that (1) the accuracy and completeness in preparing the creditor listing are the shared responsibility of the debtor and the debtor's attorney, (2) the court will rely on the creditor listing for all mailings, and (3) that the various schedules and statements required by the Bankruptcy Rules are not used for mailing purposes.

Master mailing list of creditors submitted via:

- (a) ☒ computer diskette listing a total of 2 creditors; or
(b) _____ scannable hard copy, with Request for Waiver attached,
consisting of _____ pages, listing a total of _____ creditors



SYCAMORE INVESTMENTS LLC

Debtor

Joint Debtor

Date: 6-20-17

[Check if applicable] _____ Creditor(s) with
foreign addresses included on disk/hard copy.

Sycamore Investments LLC - Creditors List - 6-20-17

Elizabeth Building & Loan Association, Inc.
519 Washington St.
Portsmouth, VA 23704

Dr. Walter Blakenbaker
2350 Suffolk Road
Charlottesville, VA 22901

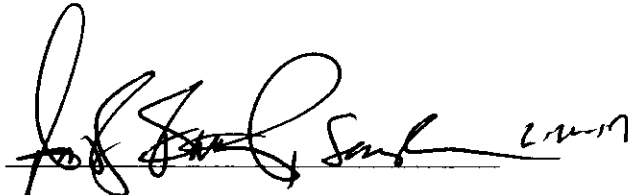
RESOLUTION TO FILE CHAPTER 11 REORGANIZATION

WHEREAS, this limited liability company member(s) have met on this 20th day of June, 2017, and has authorized Anthony Balthrop, Managing Member, to proceed with having to file a voluntary petition of reorganization under Chapter 11 and to formulated a plan of reorganization that it is fair and feasible, and WHEREAS, this company believes that creditors of this limited liability company will support the proposed plans, be it:

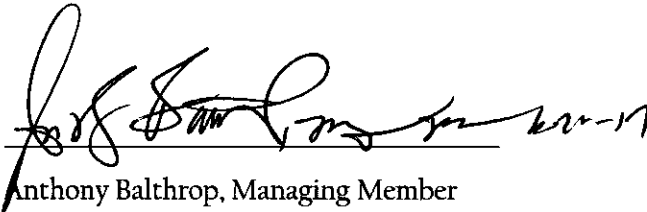
RESOLVED, that the Limited Liability Company has fully authorized Anthony Balthrop, Sole Managing Member to proceed with the filing of a voluntary Chapter 11 petition to devise a fair and reasonable plan to pay all creditors secured and unsecured,

The undersigned hereby certifies that he is the duly elected and qualified Secretary and custodian of books and seal of Sycamore Investments LLC, a Virginia limited liability company, formed pursuant to the laws of the State of Virginia, and that the foregoing is a true record of a resolution adopted at a meeting of the member(s) and that the said meeting was held in accordance with state law and the operating agreement of the above named limited liability company on June 20, 2017, and that the said resolution is now in full force and effect without modification or rescission.

IN WITNESS WHEREOF, I have executed my name as Secretary below on this 20th day of June 2017.

A handwritten signature in black ink, appearing to read 'Anthony Balthrop', followed by a horizontal line and the date '6-20-17'.

Anthony Balthrop, Secretary

A handwritten signature in black ink, appearing to read 'Anthony Balthrop', followed by a horizontal line and the date '6-20-17'.

Anthony Balthrop, Managing Member